

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2001

Application or Docket Number

017446..6321

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 11           |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 11 minus 20= | 0                        |
| INDEPENDENT CLAIMS               | 4 minus 3=   | 1                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE

| RATE      | FEES   |
|-----------|--------|
| BASIC FEE | 370.00 |
| OR        |        |
| X\$ 9=    |        |
| OR        |        |
| X42=      |        |
| OR        |        |
| +140=     |        |
| OR        |        |
| TOTAL     |        |

OTHER THAN  
OR SMALL ENTITY

| RATE      | FEES   |
|-----------|--------|
| BASIC FEE | 740.00 |
| OR        |        |
| X\$18=    |        |
| OR        |        |
| X84=      | 84     |
| OR        |        |
| +280=     |        |
| OR        |        |
| TOTAL     | 324    |

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|--------------------------|---|------------------|
|  | Total                                     | Minus                    | 20  | =                |
| Independent                                    | 4   | Minus                    | 4   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   | <input type="checkbox"/> |   |                  |

SMALL ENTITY OR OTHER THAN  
OR SMALL ENTITY

| RATE      | ADDI-<br>TIONAL<br>FEE | RATE      | ADDI-<br>TIONAL<br>FEE |
|-----------|------------------------|-----------|------------------------|
| X\$ 9=    |                        | X\$18=    |                        |
| OR        |                        | OR        |                        |
| X42=      |                        | X84=      |                        |
| OR        |                        | OR        |                        |
| +140=     |                        | +280=     |                        |
| OR        |                        | OR        |                        |
| TOTAL     |                        | TOTAL     |                        |
| ADDT. FEE |                        | ADDT. FEE |                        |

9/28/05

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|--------------------------|---|------------------|
|  | Total                                     | Minus                    | 20  | =                |
| Independent                                    | 4   | Minus                    | 4   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   | <input type="checkbox"/> |   |                  |

| RATE      | ADDI-<br>TIONAL<br>FEE | RATE      | ADDI-<br>TIONAL<br>FEE |
|-----------|------------------------|-----------|------------------------|
| X\$ 9=    |                        | X\$18=    |                        |
| OR        |                        | OR        |                        |
| X42=      |                        | X84=      |                        |
| OR        |                        | OR        |                        |
| +140=     |                        | +280=     |                        |
| OR        |                        | OR        |                        |
| TOTAL     |                        | TOTAL     |                        |
| ADDT. FEE |                        | ADDT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|--------------------------|---|------------------|
|  | Total                                     | Minus                    | 20  | =                |
| Independent                                    | 4   | Minus                    | 4   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   | <input type="checkbox"/> |   |                  |

| RATE      | ADDI-<br>TIONAL<br>FEE | RATE      | ADDI-<br>TIONAL<br>FEE |
|-----------|------------------------|-----------|------------------------|
| X\$ 9=    |                        | X\$18=    |                        |
| OR        |                        | OR        |                        |
| X42=      |                        | X84=      |                        |
| OR        |                        | OR        |                        |
| +140=     |                        | +280=     |                        |
| OR        |                        | OR        |                        |
| TOTAL     |                        | TOTAL     |                        |
| ADDT. FEE |                        | ADDT. FEE |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.